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1. Ca. 1912.1

**Harvard Medical School
Library**



Gift of
Medical Library Association

BULLETIN

OF THE

Medical Library Association

Vol. 8 N. S.
July 1918—April 1919

BALTIMORE
1919





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bind for permanent keeping . . ." By this ruling our members are entitled to receive free copies of all the better class journals as these are always bound. Of course the publishers must take advantage of the ruling and eliminate all the waste possible, so it is up to us to convince them of our privilege under the exception, and assure them that the books are bound and have a permanent place on our shelves.

GERMAN PERIODICALS FOR 1919.

Few Medical Libraries received any German periodicals after the beginning of 1916, although most of us subscribed through our chosen agents for 1916 and 1917, many ordering that these be held abroad until cession of hostilities. After America's entry into the war, in the spring of 1917, complications arose which made it seem a forlorn hope. In 1918 arrangements were made by the American Library Association with the State Department and the War Trade and Censorship Boards, in Washington, for the importation of a limited number of journals by institutions. The details were worked out by Dr. M. L. Raney, Librarian of the Johns Hopkins University, Secretary of the Committee, and many institutions availed themselves of this opportunity to procure their 1918 subscriptions.

The A. L. A. Committee on Importations desired to drop its burden for 1919, but upon conference in Washington this was proved impractical until after the signing of the Peace Treaty. It is impossible for any of the agents to trade with an enemy country, war conditions prevail in the interim, as the State Department cannot give permission to any agent at the present time. In consequence German periodicals for 1919 must be reordered through this Committee, and to obtain these the orders should be placed immediately. Some of us did not take advantage of this opportunity for 1918, but feeling that the danger in transportation is over, have now availed ourselves of the privilege for both 1918 and 1919.

These orders must be made out in duplicate, and bills must be met promptly when presented. The foreign agents handling this material mail their bills in installments, and great difficulty was encountered in 1918 because the Libraries receiving material did not pay for it promptly. Transportation charges will of course be met by the Libraries receiving same, and information regarding this may be found in the Library Journal for September and November 1918. Many Libraries will wait and take their chances with their agent, but those desiring to order through this Committee should do so at once. Address communications to Dr. M. L. Raney, Secretary A. L. A. Committee on Importations, Johns Hopkins University, Baltimore, Md.

Please submit all lists in alphabetical order and in duplicate.

N. S. Vol. 8, No. 2. October, 1918.

BULLETIN
OF THE
Medical Library Association

QUARTERLY





1,2, 1912.1

THE MEDICAL LIBRARY*

By Dr. John Ruhrah

My first words must express my deepest thanks for the great honor which you have conferred upon me. In its hundred and twenty-one years of existence the Faculty has had sixty-nine presidents, and on the roll of these one finds the names of many of Maryland's most illustrious physicians and surgeons. Truly a goodly company, and one which any man might feel justly proud to be asked to join.

The presidents of the Faculty have been chosen for various reasons. To some it has come as a fitting tribute to their professional skill and standing; to some perhaps as a matter of what might be termed political preferment and to others, like myself, as a reward for years of service in the upbuilding and upholding of the organization. You all doubtless know that for many years the growth and welfare of the Faculty has been my dearest hobby and it has been a pleasure to have seen it grow from a society of some three hundred members to one of over a thousand. It has been my delight to have seen the Faculty change its home several times until we are at last housed in this comfortable building of our own. As secretary for ten years, as a member of the Osler Committee, as member and treasurer of the Building Committee, as a member of the executive group of the Building Committee, as a member of the House Committee, of the Council and of the Library Committee it has been my privilege to have taken active part in the routine of the organization which owes its greatest debt, one of which we can never repay, to Sir William Osler, without whom I doubt we had been yet moved from St. Paul street. For the present building and organization there are many others to thank, so many that one fears to name any, lest the list be incomplete or ill chosen.

This is our tenth year in the new building and while through constant economy and saving, we have been able to pay off most of our indebtedness, there still remains a small debt; and you need hardly be told that this is mentioned because it is my belief that this should be paid promptly and that a special committee will be appointed to attempt to collect this sum at an early date. Free from incumbrance, for the first time in years, the organization should go forward in its usefulness to the profession and to the public. There are numerous fields of endeavor, most of which are untouched, or nearly so, by our present scheme of things. Whatever dreams we may have had, whatever visions still haunt us, may become realities if we but bend our energies to their fulfilment.

*Presidential address delivered before the Medical and Chirurgical Faculty of the State of Maryland, April 22, 1919.

Among the activities that are of paramount importance is the Library. While most of my activities have been along the lines of organization, of finance and of the routine that goes with it, the Library end always attracted most; and at last, almost by indirection, it was my privilege to occupy for two years what may be regarded by a book lover as the most coveted of all positions—that of Chairman of the Library Committee. It is my purpose to call your attention to some of the things a medical library means to the profession and the public.

The earliest medical library of Maryland, apart from those owned by individuals, was that established in 1813, when the Faculty of the University of Maryland bought the library of Dr. John Crawford from his widow. There were several hundred volumes which were added to by generous gifts from various contributors.

The library of the Faculty was started in 1830 by Dr. Samuel Baker, who at the annual meeting of that year offered a resolution, as follows:

“Resolved, That a committee of five, to be called a Library Committee, be appointed to purchase such periodical and other standard works in medicine as they may deem proper, to be placed in some suitable situation for the use of the members of the Medical and Chirurgical Faculty of the State; and that this Committee be authorized to draw on the Treasurer for an amount not exceeding \$500 for the purpose above-mentioned, and that this Committee report at the next meeting of the convention. It is also made the duty of this Committee to draw up such rules and regulations as may be necessary for the safe keeping and management of the Library so procured.”

In 1833, in the report of the Library Committee, we read that “they entertain a belief that at some future day many learned teachers and authors who may adorn our State will acknowledge themselves indebted to your wisdom and liberality for facilities enjoyed by them in the prosecution of their researches through the formation of your useful library.” This hope, it may be stated, has been amply fulfilled, and it may be echoed for future generations. This collection was put in charge of Dr. John Fonerden, who was president later, in 1854-1855.

Every year some two or three hundred dollars was appropriated for books, and the library grew slowly but surely. It was moved from place to place, and finally, in 1858, the hope of the Faculty was at last accomplished. They owned their own building at 47 North Calvert street. The arduous labors of securing that building, which housed the library, seemed to have exhausted the strength of the Faculty, for it slumbered from 1860 to 1869. A chosen few kept the faith and the form of the organization, but there were no meetings. As Cordell says: “And now, when the Society had attained the supreme object of its wishes and aspiration in the possession of a building of its own, and when expectations of activity

and usefulness for a long period were most justifiable, it fell into a long sleep."

History usually repeats itself and the fate of the Faculty in 1860 should be warning to us who now hold the torch on high. One may be thought pessimistic, perhaps, but there are not wanting the signs and symptoms of impending lethargy. The energies of the profession, and most rightly so, have been turned into the channels of military activity, and this was doubtless the explanation of the lethargy of 1860-1869: part of the profession off at war and the other part overworked.

An organization that has lived one hundred and twenty-one years may well be expected to maintain a vigorous activity long into the future, and endowed, as we now are, with a splendid building and an ever-growing library, an effort to increase the usefulness of both must act like a tonic. The building has become a center of medical activities of various kinds; the library is perhaps less thought about, except by those pursuing the study and researches in medicine. One may well ask, what is the value and meaning of a medical library?

Dr. Osler used to say: "To study the phenomena of disease without books is to sail an uncharted sea, while to read books without patients is not to go to sea at all." Books, then, are the charts of medicine. There is to me no more fascinating study than comparing the charts of the early mariners with those of today and of yesterday. By so doing we can trace the history of the world, the rise and fall of empire, the voyages of discovery and of conquest. Gradually the outlines of the coasts become more accurately charted, but the constant change requires from time to time corrected charts, for currents deviate and coast lines vary so that no matter how true a map it was a hundred years ago, the mariner of today wants the present-day chart when he sails out for some distant port. But the charts, the maps, show not only the configuration of the land but the artificial boundaries of nations, with the constant change, the eternal human ebb and flow, never to be fixed until the end of man. In medicine, countless mariners course up and down the broad highways of the sea searching for the promontories of truth. Little by little we have acquired a reasonably accurate chart of a fairly wide domain. We know the outline of much of the coast, the higher hills and mountains, some of which brave and undaunted souls have climbed, whilst others have sailed far up the broader rivers. Like the earth, the territory of medical truth has been and is occupied by a restless, uncertain people, and the scars of many wars and conflicts have left their unmistakable traces. The medical books are the maps of these countries, by which we can follow the early adventurers. Some have sailed for commerce and some for discovery and some for mere adventure, and many are the strange trophies and stranger tales the travelers bring home. The domains of medical knowledge have been ruled and dominated

by many great minds and schools. These kings and nations of the intellect have arisen, made converts, ruled and fought and vanished by hundreds and thousands, leaving, as a rule, no imprint; but there are some who charted the domain as they found it, or thought that it was, and today we can look back, and, in part, say with Browning:

"This rage was right in the main,
This acquiescence vain."

The Medical Library is a school, a very important school, where one may commune with all the old medical worthies for the asking. What a furor it would create if it were announced that Laennec, or John Hunter, or William Harvey, or any other of the great men of the profession, would be present at our meeting. How the hall would be crowded! How eager each to hear what the great man had to say! And yet how unmindful are most of us to the fact that the best that Laennec, that John Hunter or William Harvey did and said are with us constantly, on the shelves of the Library. Any day we may wander at will with Louis through the wards of the Hotel Dieu and listen to the wonderful descriptions of typhoid fever, or with Trousseau through the Hôpital St Antoine, or again at the Hôtel Dieu and learn at first hand how to tell infantile tetany or gastric vertigo—to mention only two of the things to which his name is forever linked. Would you walk five miles to hear Hippocrates read his writings on malaria, or his crisp description of mumps? Of course you would, or travel half the continent over, but how painfully few take the trouble to listen to the greatest of all medical teachers. Have you imagination? With the aid of a few volumes you may travel to the temples of Æsculapius at Cos or at Pergamos, where, on some wooded mountain side, trained priests will show you how the old Greek ministered to the sick, and find that it is not a far cry from there to the modern mineral spring or some of the places where they heal by faith, prayer and ritual. You can slip easily across to Rome to listen to Celsus on surgery, or, if you are interested, stop to hear Soranus, of Ephesus, on midwifery or obstetrics or the diseases of children, or call on Aretæus, the Cappadocian, and at first hand get descriptions of pneumonia, elephantiasis, tetanus or diphtheria. He would tell you that he was the first to differentiate cerebral from spinal paralysis and to describe the decussation of the pyramids. As on a magic carpet one at will can visit Iba Sina, the "Prince of Physicians," commonly called Avicenna, or listen five minutes to the Ladies of Salerno, or slip into Montpellier to be charmed by the alchemists, or as far as Basel to see Paracelsus burn the works of Galen and Avicenna. Endless the journey, and we may choose at will the great souls who have labored and left their best for our delectation. And we close the book and we are at home again.

The Library is not only a place where are garnered the best work of the masters of the times that are gone but it holds equally as

well the best thought of the present age. In the new books, and particularly in the monographs and journals, one finds an ever-changing store of information: what the best men are doing the world over for all the different diseases and conditions. Woe unto the man who fails in his duty of keeping up with the times! Only too often are his sins of omission visited upon the heads of his patients. Sometimes, indeed, they may descend upon his own, as in the case related by Sir William Osler of the physician who brought his cretin son for diagnosis. For years the mis-shapen, grotesque dwarf had sat directly under his father's eyes, and for years the journals and later books had featured the results obtained by the use of desiccated thyroid and had pictured the cretin with its unmistakable appearance. Both passed unnoticed, and when asked why he had not recognized the condition himself the poor father answered that he was too busy practicing medicine to read books about it. The lesson is obvious.

Unless one takes advantage of the best modern thought much is missed. Take, for example, the hypertrophic stenosis of the pylorus—that terrible condition, first clearly described by Hezekiah Beardsley, of Connecticut, in 1788, and which formerly largely claimed its victims. Unless one reads the books it might escape diagnosis, or, if it did not, might have the rather unsatisfactory operation of gastro-enterostomy suggested as a cure. If the surgeon or pediatricist was up to date of course he would suggest the simpler and far safer operation of Rammstedt, or, perhaps even better, that suggested by Strauss, of Chicago, and but recently described, and who knows but that some far better method of treatment may be forthcoming tomorrow. Only by continuous and persistent reading of journals and the use of the Library can the physician know the latest and best.

We can only give the profession the opportunity to use the splendid collection of books at their disposal. We cannot drive them to the Pierian spring, much less make them drink and drink deeply of it; but those of us who have labored in the interest of the Library, and of medical libraries in general, at least have the great satisfaction of knowing that we have paved the way for the profession, and if they persist in straying in the by-paths, instead of on the broad highway of knowledge, we can only point again and again at the signboard with the finger pointed to SUCCESS. For it means success to be well informed. Look about at the most successful medical men, successful in the real sense of the word, and you at once see that they are successful because they know.

The users of libraries are an interesting lot, and the most indefatigable are the book-worms and the authors. The latter raise the number of loans and readers tremendously. An old truth, and Boswell reports Dr. Johnson saying: "A man will turn over half a library to make one book." It is, indeed, these readers who are also writers that esteem books at their true worth, as Sir Wil-

liam Osler has phrased it: "Only a maker of books can appreciate the labors of others at their true value." These readers are, as a rule, trained and know how to find what they want, but the average reader needs help which only the specially trained librarian can give. Without such help he is like a visitor in an unlabeled art gallery without a catalogue. To quote Dr. Johnson again, "Knowledge is of two kinds. We know a subject ourselves or we know where we can find information about it." Now almost any doctor knows that medical information can be found in a medical library, but there are but few who know how to go about extracting it. And here it is that the trained worker comes in. Thanks to the Library Schools and the American Library Association it is possible for library workers to learn the essentials under competent supervision. The special medical training comes only by working in the medical library. The trained worker should know where to find information of all kinds, and so save the time and energy of the reader who does not know. With books in book stacks, and only a card catalogue, many become discouraged and give up the task of seeking knowledge on some important topic because they do not know how to go about it.

It has been a dream of mine, for a long time, to have a special course of a week or two at some large library, where the medical librarians could teach each other, and be taught by special instructors, in how best to use the library and how to help others. However useful collections of medical books are it does not seem that they fulfill as yet, their highest function.

There was a time when libraries were largely presided over by chauvinistic book lovers, as jealous of their charges as an anxious lover. Their happiest days were those in which there were the fewest readers to disturb them. There is the well-known story of one of the former librarians at Harvard, who was seen one day at closing time with a smile of satisfaction on his face. On being asked why he was so happy he replied that every book except two was standing in its place on the shelves, and that Agassiz had the missing ones and he was going over to his house to bring the vagrant volumes home.

Happily this attitude has passed, or is rapidly passing, and the modern medical librarian counts his happiest days those in which the greatest number of volumes have been consulted and loaned.

The medical librarian should be well trained in general library work, and of necessity familiar with the latest and best in cataloging and on the other technical features of the work. The monumental labor of Billings, of Fletcher and others in the Index Catalogue of the Surgeon General's Library and in the Index Medicus, now so ably carried on by Garrison, have lightened the labors of the medical librarian. Given these two aids, time and assiduity, one can bring together the literature of any given subject. The ideal librarian should be able to do more. He should be able to help

the busy practitioner who wants a few authoritative articles on some subject, together with the latest expression of opinion. With comparatively little aid from specialists in various lines, it should be possible to keep listed on catalogue cards the most important contributions on the subjects most liable to be inquired about; the small medical library society or committee composed of two or three members of each specialty, by meeting once a month for an hour could keep the matter well in hand to their own satisfaction, and that of everybody else. With an authoritative leader this altruistic work could be carried out. And what a comfort and help it would be to be able to get at a moment's notice the latest and the best without wasting time and without tiresome search. There are not so many record-breaking contributions, nor so many with really good bibliographies, so that the catalogue, while large, would not be formidable. The size could be kept down by deleting older articles in favor of better or more recent ones.

The Library Committee have to pick and choose carefully, and in the great stream of books that comes ceaselessly from the presses only the most useful can be chosen. Billings, in his address entitled "Our Medical Literature," says: "There will be a certain number of medical books and papers printed next year, just as there will be a certain number of children born; so we can within certain limits predict the number of these births and the proportion of the sexes, or even of monsters; so we can within certain limits predict the amount and character of literature that is to come, the ideas that are yet unborn."

This plethora of printing renders the choice exceedingly difficult when the number of purchases is limited—the difficulty being greater than ever before.

The modern medical literature is more fantastic than that of the past. The field for the imagination is so much larger, and cheap printing has led fools to write that should otherwise have remained silent. It is impossible to sift all the good from the bad, they are so intermingled, and yet one skilled in interpretation can sort with reasonable accuracy the useful from the useless. Through years of review work one comes to regard much of the modern medical press as not unlike the stream of garbage that some cities pass on endless belts before trained pickers. Here and there a precious gem, a bit of gold or silver, a countless lot of used and tattered truth from other days, useful but not new, and then a vast amount of by-products, ashes and refuse that weary, even if the amount astonishes the beholder. Fortunately for the reader, there are certain sources where the output is not refuse, but the product of honest toil, and these books and journals are like the output of the workshop—some better than others, but for the most part honest and well intentioned. But even here one must test the wares carefully before he chooses, for there are skilful imitations, and pails that will not hold water, and cracked pots, and perhaps the task

is more difficult than with the garbage. But Time, who tests all things, always tells, and, in the end, the real is separated from the false.

One should not be too hasty in deciding what is of lasting value and what is of mere ephemeral interest. As Oliver Wendell Holmes remarked: "There comes a time for every book in the library when it is wanted by somebody." Hundreds of examples could be cited of books which have become classics, and yet were spurned, even by second-hand book dealers. Semmelweis' *Essay on the Contagiousness of Puerperal Fever* once went a-begging at a shilling a copy, and a dozen copies of Beaumont's Plattsburgh edition of his researches on the *Physiology of Digestion* mouldered on the shelves of our own Baltimore book shops until an essay of Dr. Osler's brought the volume to local attention, when a dollar sufficed to claim a copy. Osler himself once told how he picked up Auenbrugger's *Inventum Novum*, in Italy for a lira.

The Library Committee has been hampered largely by lack of funds, but gradually even this will be remedied. There are now the Baker Fund for books on therapeutics, the Finney Fund for surgical books, the Osler Fund and the Frick Fund for things medical and the Ellis Bequest for general expenses. But we need more. For a library of such age and importance as the Medical and Chirurgical Faculty of Maryland we have received but few gifts or legacies of any considerable value. With the present number of members who have grown affluent in one branch or another, and with the large number of grateful patients recruited from the followers of King Midas, this should not be so. For bricks and mortar money is always forthcoming, but not so freely does it come for books and journals, which recalls Mr. Dooley's remark that libraries do not concern books, but architecture. If one would write his name in more than water, a special fund in the Library, with its bookplate or inscription, furnishes a means of keeping it before the coming generations perhaps the surest way. The libraries of the New York Academy of Medicine and the College of Physicians and Surgeons of Philadelphia have inscribed the names of their more munificent patrons and donors on tablets of marble inside the doorway. How many would know about Sir Thomas Bodley were it not for the Bodleian Library, or of John Radcliffe, were it not for the Radcliffe Library? One pauses to wonder whether Mr. Carnegie will not be known for centuries hence as a founder of libraries rather than in any other way. Would that a word to the wealthy were as sufficient as it is reputed to be to the wise.

Another feature of interest in connection with Medical Library work is the Medical Library Association. This useful organization was founded by Dr. George M. Gou'd and Sir William Osler in 1898, and is now over twenty years old, and more active than ever before in the history of the Society. Among its presidents have been such men as Osler, Jacobi, Chadwick and Musser. The object of this Associa-

tion is to give the medical librarian and others interested in medical libraries an opportunity to meet together once a year and enjoy the benefits of knowing each other and exchanging views and ideas of mutual interest. The Association also conducts an Exchange, and for many years this work has been done from the Library of our Medical and Chirurgical Faculty. The Exchange distributes books, journals and reprints, taking the duplicates from the various members and distributing them among the Library members, according to their several needs. This work is altruistic, the expense is paid by the Association and the larger libraries give, while the smaller ones receive. Some idea of the scope of the work of this Association can be gained by learning that in one year they distributed about five thousand items, either books, journals, reprints or transactions, to forty-three libraries. The Association has also published a *Bulletin*, the fourth American attempt at journalism on the part of those interested in medical libraries, and the one that has survived the longest. This is the eighth year, under the joint editorship of Miss Noyes and myself, that this little publication has maintained its place, and so far at least it does not seem to be suffering from inanition. No attempt at anything elaborate has been made, but the Society proceedings and papers, for the most part of technical interest, have been printed.

The legal profession has been able to have its libraries maintained by the State. There is no just reason why the same should not be true of medical libraries, since the followers of Æsculapius certainly give more generously of their time to the citizens—that is, to the State—than do the disciples of Blackstone and Kent. The chief difficulty is that doctors are not politicians and lawyers usually are. Moreover, the State Legislatures are largely recruited from members of the bar, and they, of course, look after their own. The medical profession, as a whole, is a modest one, and the better element have always been chary of stating their just claims. They are so accustomed to being imposed upon, and to work without compensation, that when they do ask it has been rather as a favor than a right. If we give of our time and our energies freely and without stint we have a right, and we should voice it in no uncertain terms, to have our Library aided, if not actually supported. Think, in this day of strikes, what it would mean if the medical profession ceased its free work in the hospitals, dispensaries and private practice. The public would stand aghast and our place in the community would be more truly recognized. Not that I am advocating anything so radical, but something should be done to get the profession its just rewards.

There are a number of other things to which I would gladly call your attention. Only one of these need detain us now, and it only concerns the Library indirectly. I refer to the debt of gratitude the Faculty, the profession at large and the public of Maryland owe those members of the medical profession who unselfishly

gave up everything for the service of their country. Some went into the Army, some into the Navy, while a large number who stayed at home served on the draft boards. The glorious record of the Medical Department of the Army and Navy needs no comment. This Faculty had two of its members made generals; several others headed their respective departments, and 176 members in all entered the service; more applied, but were rejected for physical or other reasons. The Maryland draftees stood first in passing physical tests in the Army, so that there were fewer rejected after being sent to camp than from any other State. Truly an enviable record, and a tribute to the fidelity and ability of the men who composed the draft boards.

To all who served in any capacity, the Faculty extends its deepest appreciation and thanks, and their names and records are to be preserved in the archives as an example to the future generations.

YALE UNIVERSITY

The School of Medicine and the University Library

In order to make the library facilities adequate for the growing need of the School of Medicine, which, as you know, is undergoing a transformation and development into a University School of the highest standards, the medical books in the University Library have been placed in the North Wing of the Old Library. The School of Medicine has now for the first time a special Medical Library and Reading Room, readily accessible, and equipped for the convenient use of the books.

Miss Margaret Brinton, from the Lane Medical Library in San Francisco, has been engaged as librarian of this special collection.

The number of medical books now in the Library is about 26,000, in addition to 10,000 dissertations, and 10,000 reprints and other pamphlets. Of this number about 14,000 volumes are serials, including society transactions and the medical papers of hospitals and other institutions. The Library currently receives more than 250 of these medical serials, including, in addition to American and British journals, about 100 of the most important published on the Continent. The "Index Medicus," the "Surgeon-General's Catalogue," and the "Quarterly Cumulative Index" make the contents of these periodicals easily accessible.

The development of this separate medical section of the University Library is of great importance in the reconstruction and growth of the School of Medicine, and it is essential that the collection of books be among the very best in the country. The work which has been done on the collection this year has shown that we already possess the nucleus of a first-rate medical library, but it has also shown that there are important gaps in the collection.

Gifts of books, periodicals, and medical pamphlets are earnestly requested.

BULLETIN
OF THE
MEDICAL LIBRARY ASSOCIATION

EDITED BY

JOHN RUHRÄH, M. D.

MISS M. C. NOYES

VOL. VIII.

APRIL, 1919.

No. 4.

THE TWENTIETH ANNUAL MEETING

The outlook for the Annual Meeting of the Association this year is very good. As announced in the last issue of the Bulletin this will take place at Atlantic City on June 9th, and the Marlborough-Blenheim will be the headquarters. Our meetings will be held there on the afternoon and evening of that date, and an unusually good program is being prepared.

In a sense this is our 20th Annual Meeting, and is actually so because of the omission of the meeting of last year. The Association was founded in May 1898, and if that meeting is not counted, and the count begins at the October 1899 meeting as the first Annual, this would in reality be the 20th Annual Meeting, as it is in fact by the omission last year.

A special effort is being made to have as many of the charter members present as possible. These were Dr. Gould, Miss Charlton, Dr. Rothrock, Mr. Fisher, Dr. Bingham, Dr. Browning, Miss Theis and Miss Noyes. Our President, this past two years, was a charter member, and it is surprising to know how many of those who were moving spirits in the organization in those first years are still actively engaged in the work. The greatest number of changes have occurred in the Boston Medical Library, as Dr. Brigham, the Assistant Librarian, who was present at the first meeting, and Dr. Chadwick, the Librarian, who was actively interested in the Association, are both dead, and although their successors were affiliated with the library at this time they were not actively interested in the work of the Association until a later date. It is appropriate that a resume of the history of the Association be presented, and there will be several discussions relative to the administration of libraries,

as well as papers, so that the meeting should prove of great benefit even though not situated in a city where there is opportunity to visit libraries. We hope that each Librarian will take the matter up and see to it that their Library has some representative. If the Librarian cannot be spared to attend, surely some member of the Library Committee, or physician who is attending the meeting of the American Medical Association, can be found who will represent it.

As this is a milestone in the history of the Association we are hopeful of a large attendance to make this the banner meeting that it should be.

MEDICAL LORE

In the National Geographic Magazine two very interesting articles have appeared by Dr. John A. Foote. In September of 1917 there was an article on "The Geography of Medicines," and in January of 1919 another article on "Medicine Fakes and Fakers of All Ages." These are called to your attention, as, not appearing in a medical journal, they may be overlooked. Both articles are profusely illustrated, and are well worth a place on the shelves of any historical section, as they contain information not to be found elsewhere. Collectively they would make a book of but 22 pages, but are pages full of information, especially the first article which relates to the sources from which drugs are procured.

DECEASED

Mortimer Frank, Chicago; University of Illinois, 1901; aged 44; died at his home, April 21, from cerebral hemorrhage. He was a graduate of the Massachusetts Institute of Technology; ophthalmologist to Michael Reese and other hospitals; a member of the American Academy of Ophthalmology and Oto-Laryngology; editor of the Bulletin of the Chicago Society of Medical History; especially known for his enthusiastic interest in medical historical subjects; the possessor of an extensive collection of medical historical books, correspondence and incunabula; the author of interesting studies on "Caricature in Medicine" and on "Early Ophthalmologic Surgeons," as well as of numerous other medical historic essays. He had recently completed a translation of Choulant's History of Anatomical Illustration which it is believed will be of great use to anatomists, artists and art schools.

